

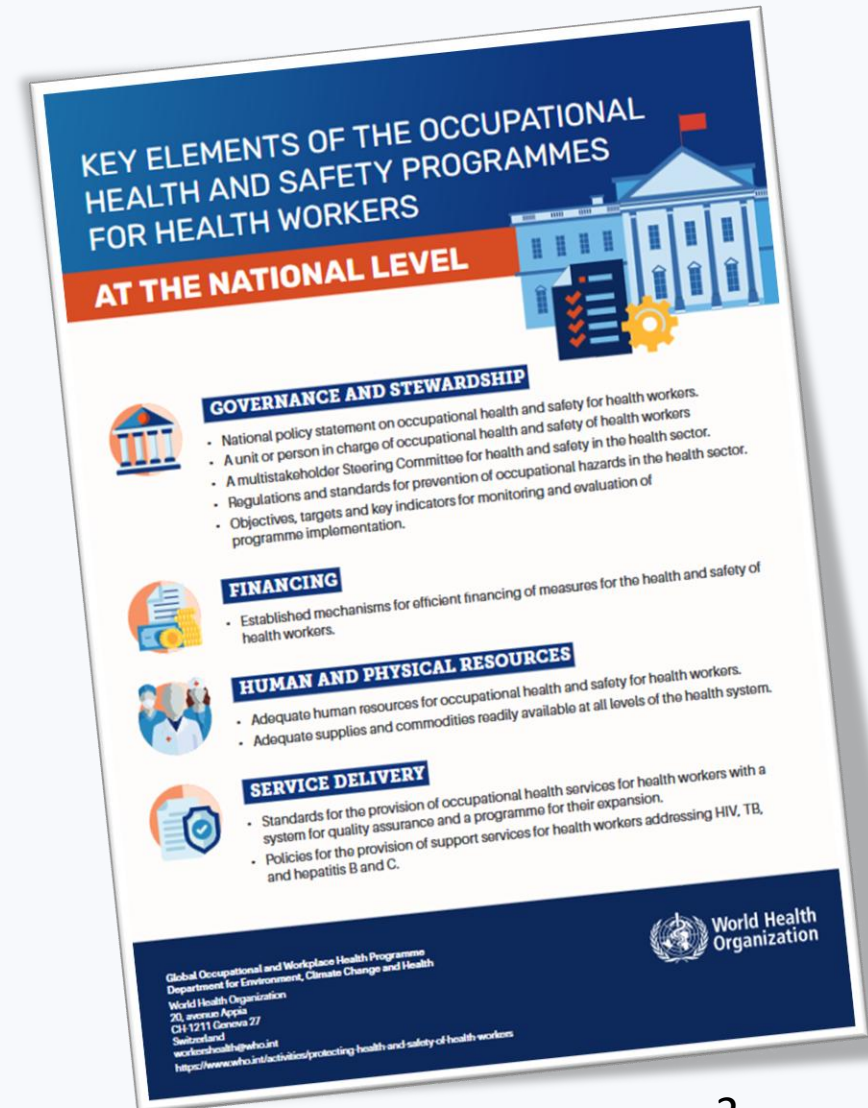
# CARING FOR THOSE WHO CARE

## Key elements of occupational health and safety programmes for health workers

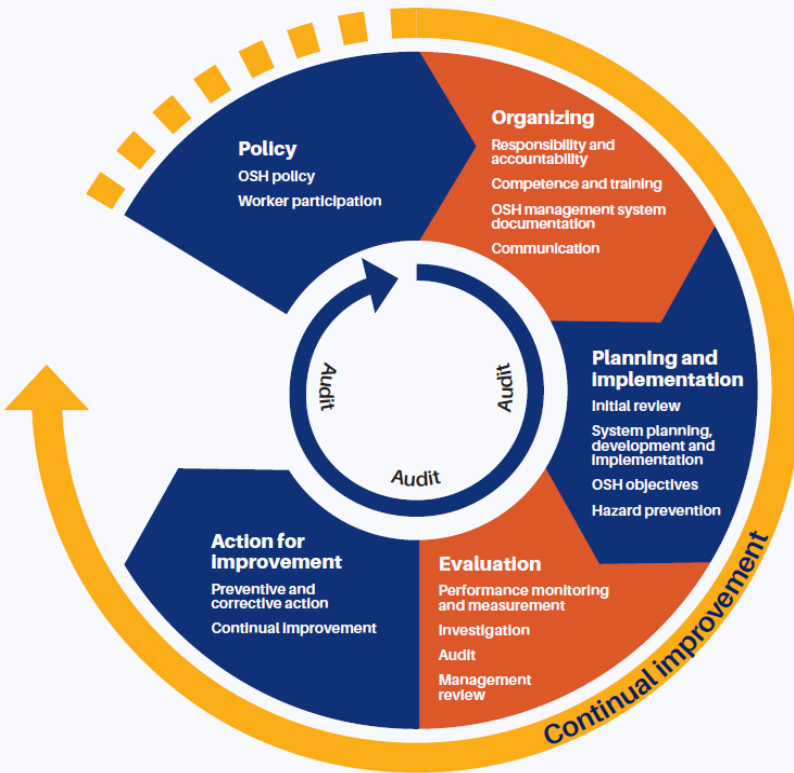


## *Purpose of this presentation*

- To inform about occupational health and safety programmes for health workers
- To outline the key elements of occupational health and safety programmes for health workers
- To demonstrate successful implementation of the key elements using examples from different countries



## *What are programmes for occupational health and safety of health workers?*



Sets of **planned** and **coordinated** activities at national, subnational and health facility levels that include **governance, regulations and standards, human resources, financing and services** aimed at:

- Preventing diseases and injuries arising out of, linked with or occurring in the course of work;
- Building a healthier and safer working environment; and
- Promoting health and well-being of health workers.

# *Occupational health and safety of health workers should be part of the core business in health care*

*Implementation of occupational health and safety (OHS) programmes for health workers is important for:*



## **Regulatory compliance**

Implementing occupational safety and health laws and regulations in the workplaces of health system



## **Quality of care**

Improving productivity of health workers, quality of care, patient safety



## **Resilience**

Increasing the resilience of health services in the face of outbreaks and public health emergencies



## **Health workforce**

Stimulating the retention of health workers by improving working conditions

## *Investing in the health safety and wellbeing of health workers is a sound business decision*



Globally, improving health, safety and well-being of health workers:

- Lowers the costs of occupational harm (estimated at up to 2% of health spending)
- Contributes to minimizing patient harm (estimated at up to 12% of health spending)



# *OHS programmes for health workers embody principles of shared responsibilities, synergy, inclusivity, sustainability, and continuous improvement*



## **1. Responsibilities of employers and workers**

Employers should ensure OHS in health sector environments;  
Workers should comply with OHS measures

## **2. Synergy with other programmes**

Eg. Quality and safety of care, health workforce etc.

## **3. Inclusivity**

Should be gender-responsive, non-discriminatory and inclusive.

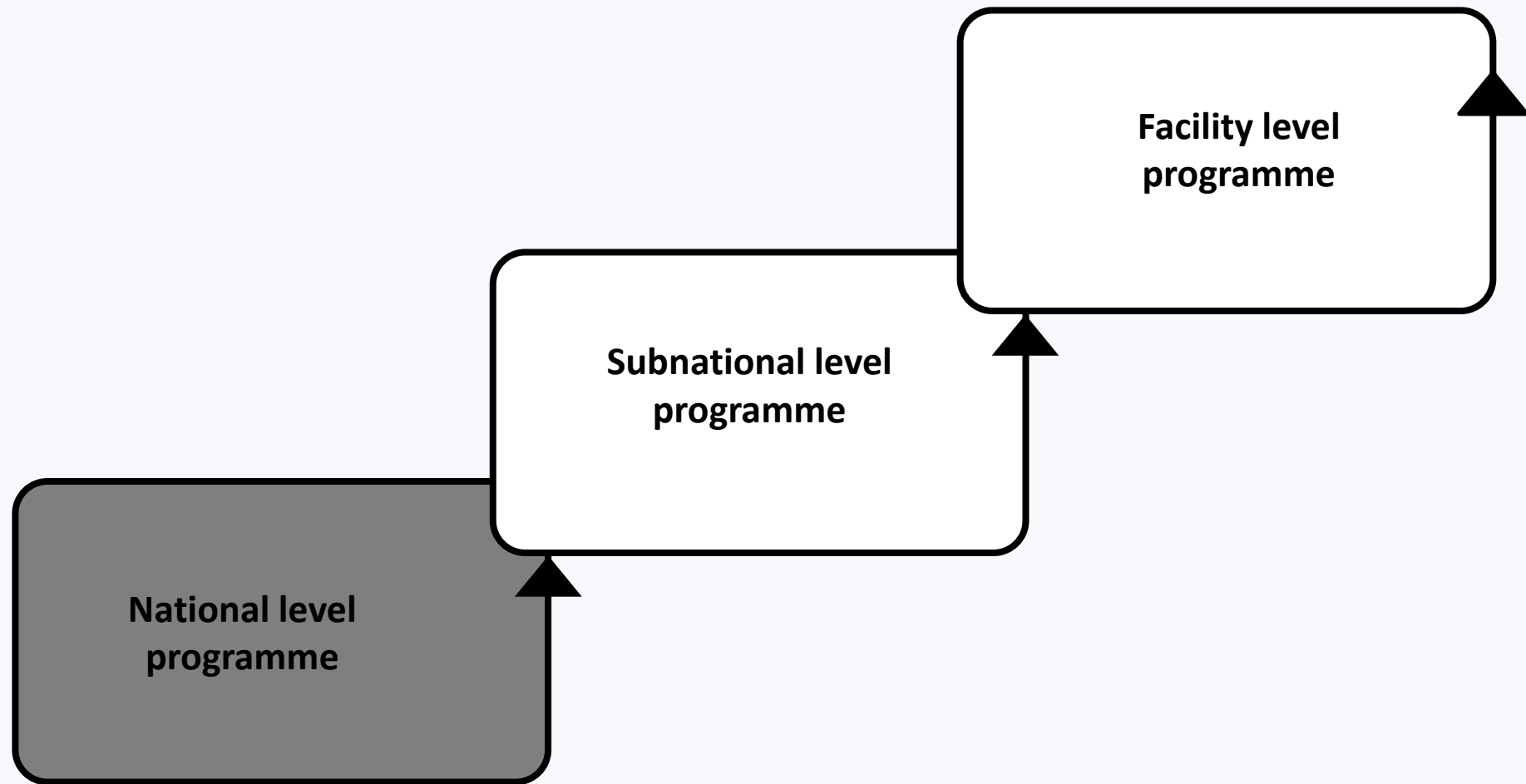
## **4. Sustainability**

Should ensure continuous protection of health workers at all times.

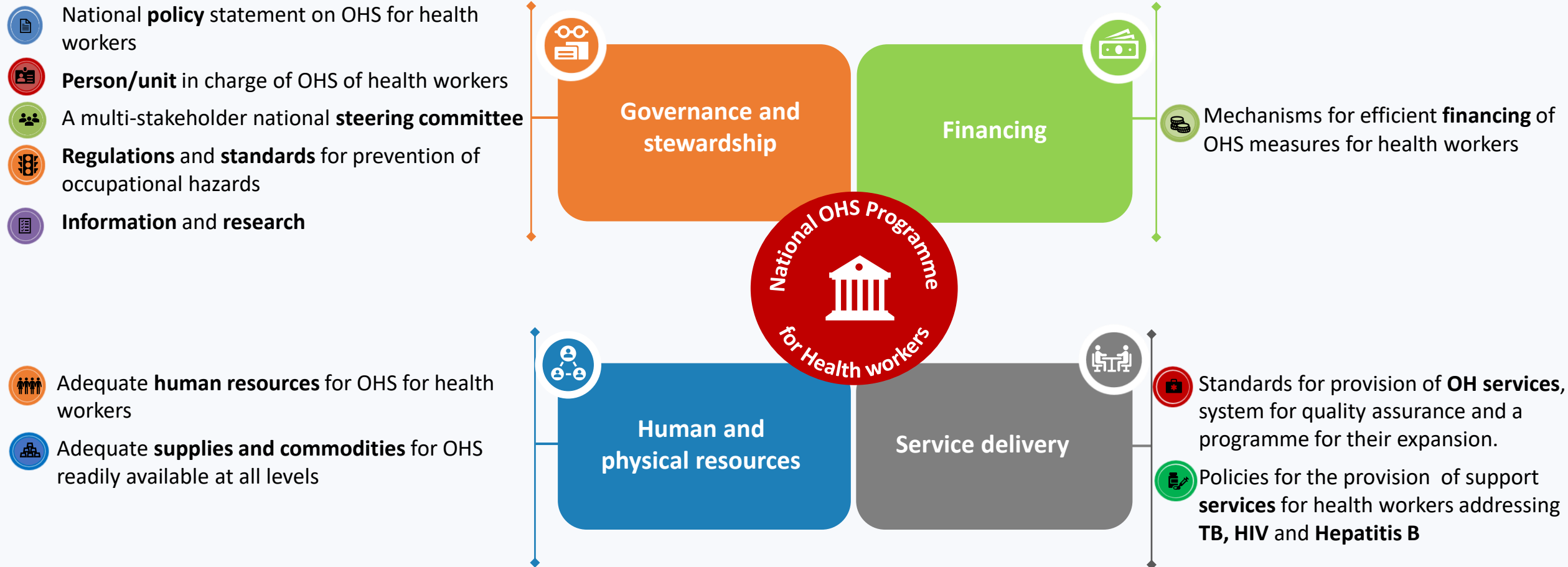
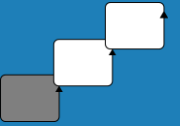
## **5. Continuous improvement and social dialogue**

Between governments, employers, workers and other stakeholders.

## *Outline of the presentation*

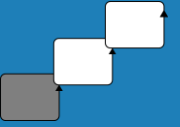


# Key elements of the OHS programmes for health workers at the national level





*There should be a national policy statement outlining the intentions and direction of the health system in protecting health workers*

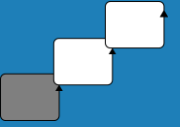


## A national policy:

- Lays down the **intentions** and **direction** of the health system in protecting health workers.
- Highlights **leadership commitment** to protecting the health and safety of all health workers.
- Should be **issued at the highest possible level** and communicated at all levels.



*There should be a unit in charge of OHS of health workers, collaborating with other national programs and authorities*



- A unit **in charge of occupational health and safety** of health workers should be identified within the ministry of health.
- It should have **technical expertise** and **mandated** to manage OHS of health workers.
- It should **collaborate** with other national programmes and national authorities responsible for OHS .

### Functions of the national unit



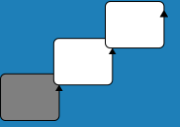
*There should be a multistakeholder national steering committee to oversee and steer programme implementation*



- A **multi-stakeholder** national **Steering Committee** should be established by order of the minister responsible for health.
- Committee membership should reflect commitment to **equity** and **diversity**
- The committee should meet **regularly**, make decisions by **consensus**, and ensure proper **documentation** and **communication**.

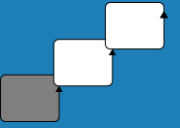


*There should be regulations and standards for protection of health workers made available in all health facilities*



- In some countries, existing occupational health and safety **regulations** may not cover all health workers
- It is important to **introduce new** and **update existing** regulations to ensure protection of all health workers
- Consideration should be given to **national protection, insurance** or **pooled support** for individual practitioners or small employers not covered by regulations.

## *Information and research should be used for effective programme monitoring at all levels*

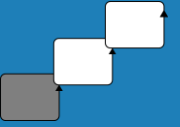


- The programme should have clear **objectives** and **indicators** to monitor performance.
- Awareness campaigns using **information**, **education** and **communication** may be used e.g., linking health workers' protection with patient safety and quality of care.
- The programme should build capacities to stimulate **practical and participatory research** on OHS for health workers





*There should be adequate and efficient mechanisms for financing occupational health and safety measures for health workers*



- Ensure **coordination of funding** sources, **pooling** of funds, and **optimized** financial flows for program financing.
- Health workers should be provided with **financial compensation** for occupational injuries, diseases, and fatalities, including social protection for sickness absence and healthcare costs.
- Financing for OHS should be **linked** with investment in the **readiness, education, and training** of health workers.



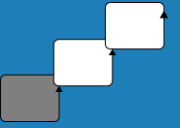
*There should be adequate human and physical resources for occupational health and safety for health workers at all levels*



- Develop **human and physical resources** for occupational health and safety across all levels.
- Health workers should have basic knowledge to protect their health and safety, **integrating OHS into pre-service training**.
- Leverage professional associations, medical education institutions, and global online training resources like [OpenWHO](#) and the [WHO Academy](#) for comprehensive training.

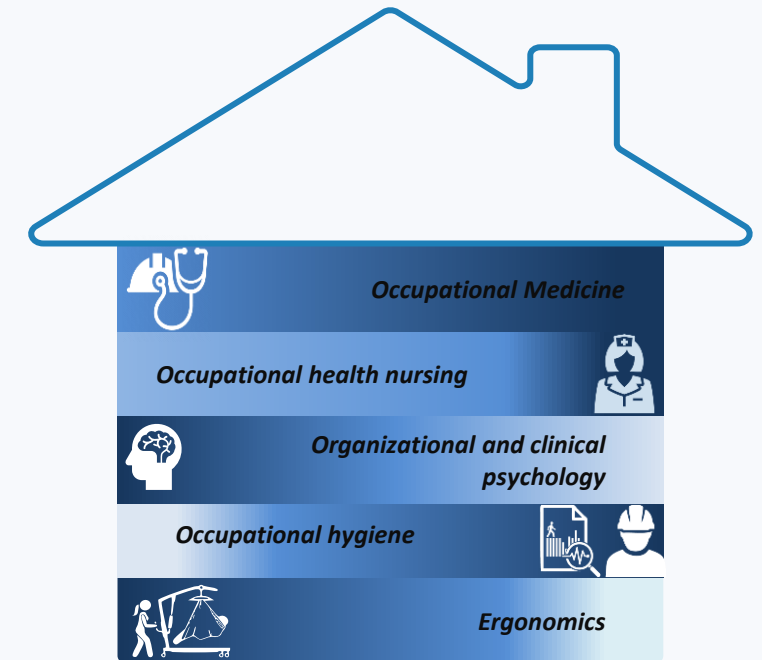


*There should be standards for provision of occupational health services, system for quality assurance and a programme for their expansion*

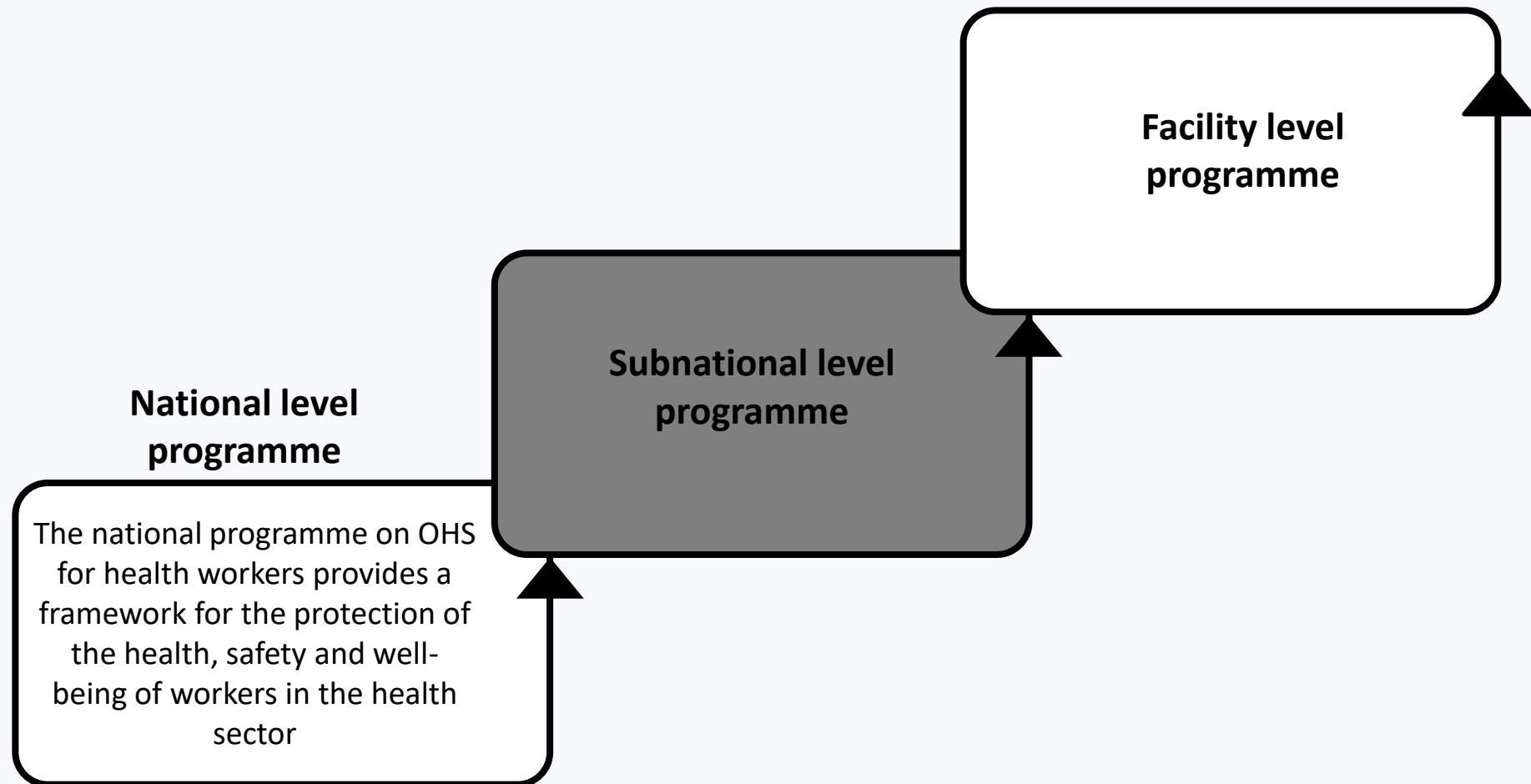


- Occupational health services for health workers should have **multidisciplinary teams** with **no cost** for workers.
- The services may be organized as **a unit** within a health facility, or as a **service shared** by a group of health facilities, or an **external service**.
- The national programme should specify the **minimum standards** for provision of occupational health services and the system for their quality assurance.

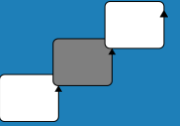
*Multidisciplinary occupational health service*



## *Outline of the presentation*



*The subnational level is responsible for operationalizing the national strategic plans on occupational health and safety of health workers*



District health management teams **serves as a bridge** between individual health facilities and the national level authority

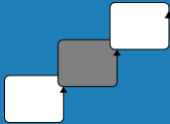


Subnational programmes may **adapt the elements of the national programme** to the local context while keeping them in line with national legislation, regulations, and policies



The provincial or district health management team may decide to appoint a **health officer with OHS training** to supervise and guide the OHS management in the health facilities located in the administrative area

# The provincial/district health officer ensures occupational health and safety for health workers through coordination, support, engagement and monitoring.



## Functions of a district officer for OHS of health workers



### Promoting preventative culture

To work with the managers of health facilities to promote a preventative culture



### Health promotion

To organize local campaigns for promoting healthy behaviours and safe practices among health workers



### Monitoring & evaluation

To monitor and evaluate the implementation of the OHS programmes for health workers in health facilities.



### Resource management

To plan and allocate resources for implementation of OHS measures.



### Coordination

To liaise, coordinate and collaborate with the national unit responsible for OHS for health workers



### Oversight

To oversee the designation of OHS focal points and establishment of the joint labour–management committees in health facilities



### Technical support

To provide technical support to health facilities including carrying out OHS audits in health facilities



### Collaboration

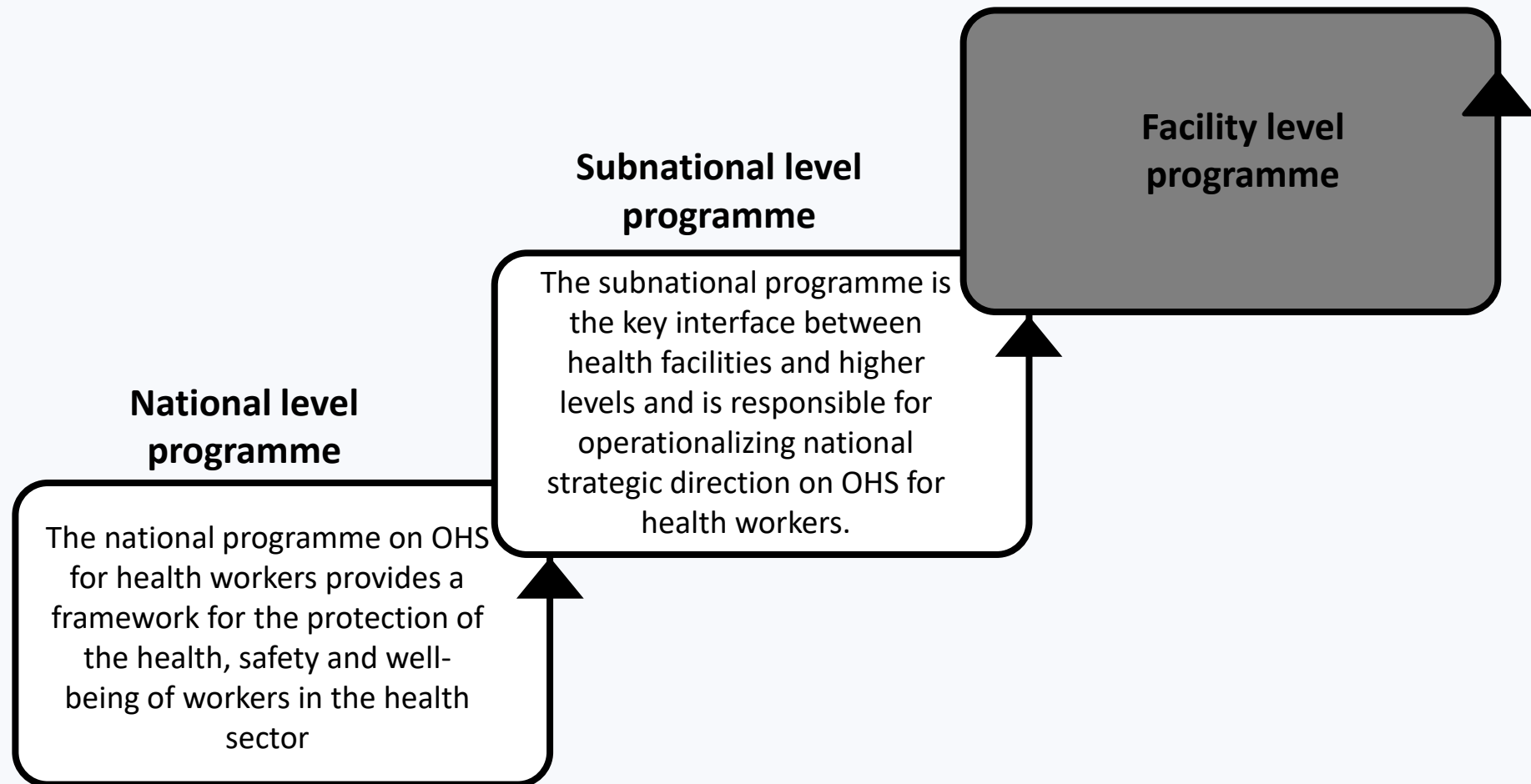
To collaborate with other departments, local authorities, community leaders and other stakeholders to promote the OHS of health workers.



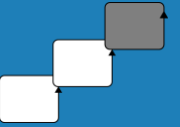
### Training

To identify training needs for human resource development in occupational health and safety

## *Outline of the presentation*



# *OHS programmes at the facility level should be developed in line with national legislation, policies and subnational programmes*



## *Key elements of the OHS programmes for health workers at the facility level*



Facility occupational health and safety policy



Facility focal point for occupational health and safety for health workers



Assessment and mitigation of occupational hazards



Joint labour–management committee for health and safety at work



Environmental hygiene and sustainability



Information, education and training



Early detection, diagnosis, treatment, care, notification and support for occupational diseases and injuries



Immunization of health workers

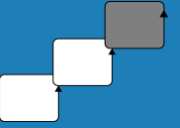


Recording, investigation and reporting of incidents



Monitoring and evaluation

*Employers should develop a facility health and safety policy and integrate its implementation into managerial objectives*

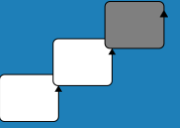


- Every employer should develop an **OHS policy** adapted to the size and type of the facility.
- The policy should be **discussed with workers** and **other stakeholders** and, when agreed, should be posted in a visible area of the facility.
- Occupational health and safety should be **incorporated** into an institution's **managerial objectives**



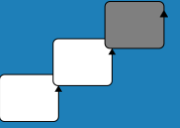


*Facility managers should designate focal points for occupational health and ensure their training on work improvement in health services.*



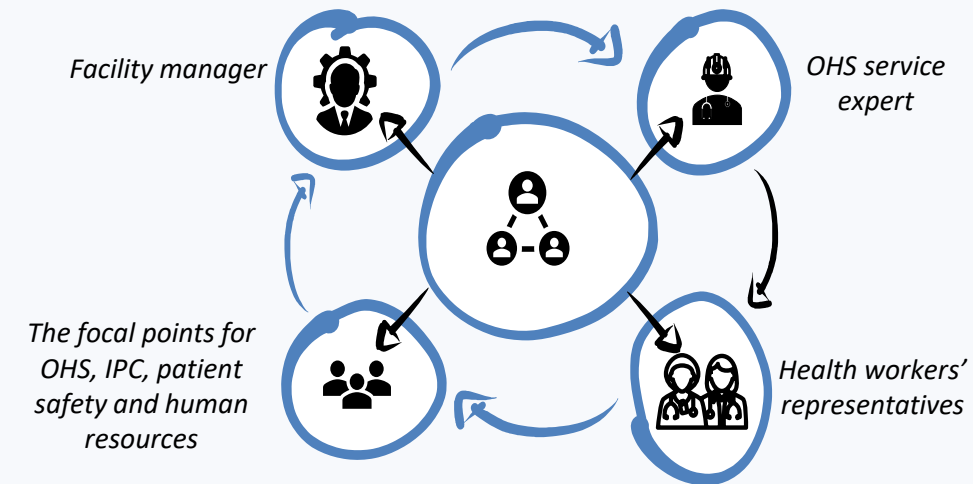
- Health facilities' managers should designate an **OHS focal point** and determine their functions according to the facility's policy
- In smaller health facilities, functions of the focal points could be **combined with other similar functions** (e.g. quality of care, patient safety, IPC etc.)
- The minimum training for the focal point should at least be the complete [Work Improvement in Health Services \(HealthWISE\)](#) training

*Gender balanced joint labour–management committees should be established for policy development and implementation at the facility level.*

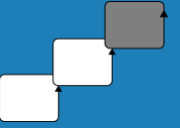


- Health facilities exceeding a nationally-specified employee threshold may need to form a **joint labor-management committee**, ensuring **gender balance**.
- The committee's meetings should be documented and shared with the facility manager for **executive action**.
- The committee should be involved in **developing** and **implementing** the facility's OHS policy, addressing incidents, occupational diseases, injuries, and workers' complaints.

*The joint labour–management committees for health workers*



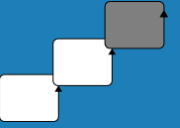
*A regular training programme should be designed, planned and implemented for all health workers and specific target groups*



- **Regular OHS training** should be provided to all workers including managers, health workers, facility support, subcontractors, and community health workers.
- The **focal points** for OHS should **train the health and safety committees**, line managers and administrators.
- The duration of the training will depend on the **OHS experience** of the trainees and the training objectives

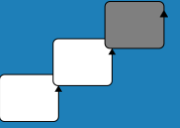


*Occupational hazards and the effectiveness of their controls should be regularly assessed and documented to inform action plans*

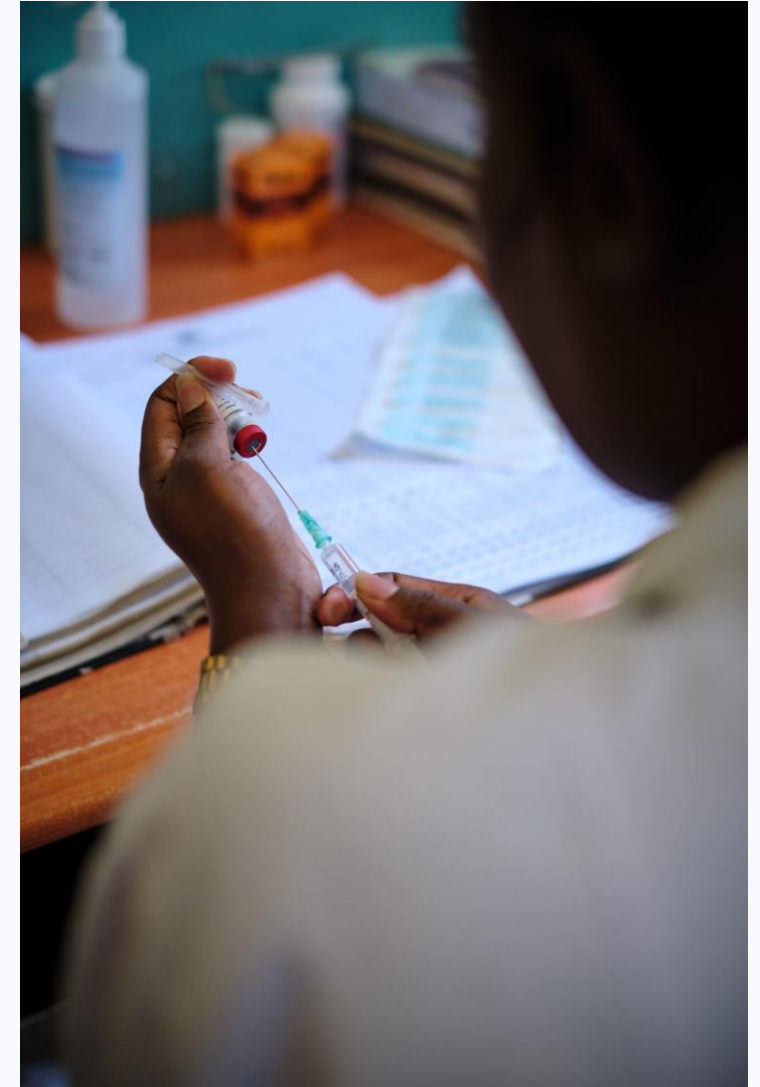


- **Regular risk assessments**, using tools, guidelines or checklists, are essential for evaluating health risks and improving control measures.
- The occupational health and safety **focal point**, together with the **health and safety committee**, should develop and train workers on these tools.
- **Community engagement** is important to prevent stigmatization of health workers, foster public respect, and mitigate the risk of **violence and harassment** during their commute and within the community

*A policy for necessary vaccinations of health workers should be implemented, aligning with national immunization guidelines*

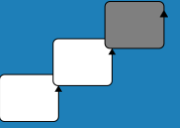


- The WHO recommendations on **vaccinations for health workers** include hepatitis B, polio, diphtheria, measles, rubella, meningococcal, influenza, varicella, COVID-19 and cholera.
- Vaccination must be **free of charge** and should be carried out in accordance with national law.
- Introduction of other vaccines not included in the national immunization schedule should be based on **risk assessment**.



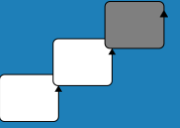


*An incident management programme eliminates the barriers to reporting and ensures a blame-free environment for reporting exposures and incidents*



- There should be an **incident management programme** including standard procedures for reporting, investigation, corrective action and follow-up.
- **Appropriately trained persons** should conduct an initial assessment and counselling and refer exposed workers for follow-up if needed.
- **Reporting** should be actively encouraged and rewarded.

*Access to early detection, treatment, and support for occupational injuries and diseases should be ensured, including financial compensation.*

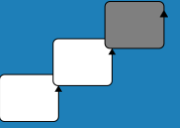


- Health workers should have access to:
  - ✓ **Early detection, diagnosis, treatment, care and support** for occupational injuries and diseases.
  - ✓ **Financial compensation** for occupational injuries and diseases.
- Employers should **notify** relevant authorities of all occupational diseases and injuries and **provide information** to health workers concerning the notified cases.





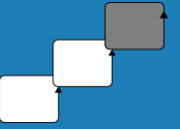
*There should be measures for monitoring progress in implementing the occupational health and safety programme at the facility level*



- Health facilities should **measure, record, and monitor** their OHS performance on a regular basis.
- The selection of performance indicators should:
  - ✓ Be in line with national and subnational indicators to ensure **comparability**.
  - ✓ Reflect the **commitments** and the **objectives** of the facility's policy on occupational health and safety.



# *Safe water for drinking and basic sanitation is crucial for implementation of IPC activities and environmental cleaning required for OHS and safe service delivery*



## *WHO guidance on environmental health management in health facilities stresses the need for:*



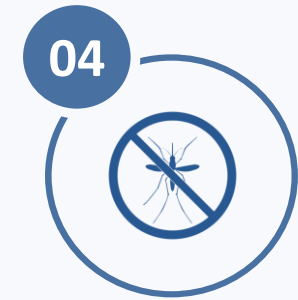
***Water for hand-washing***



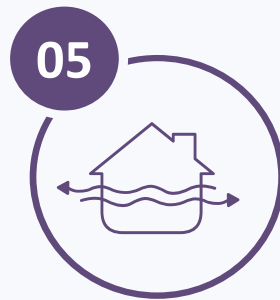
***Safe drinking-water from a protected groundwater source or a treated supply***



***Cleaning facilities to routinely clean surfaces and fittings***



***Control of disease vectors***

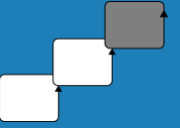


***Safe movement of air into buildings to ensure that indoor air is healthy and safe***



***Information about, and implementation of, hygiene promotion.***

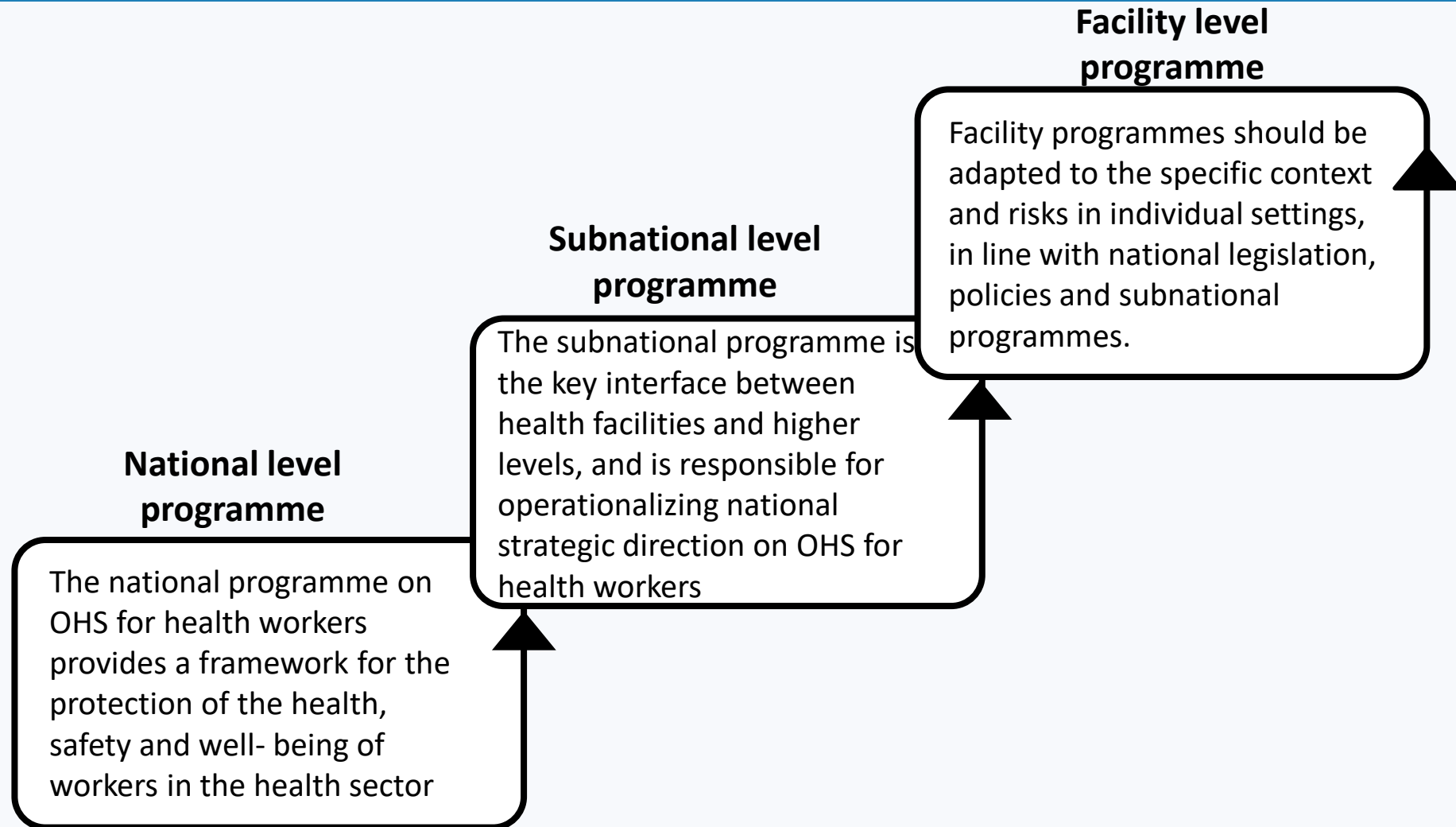
*Health facilities should have in place mechanisms for safe handling and management of health-care waste and hazardous chemicals*



- Health care waste is considered hazardous material and may be **infectious, toxic** or **radioactive**
- Health facilities should have a programme for safe health care waste management
- Health facilities should also have in place measures for the safe management of **hazardous chemicals** and **drugs**.



## *In summary*



## Resources

Caring for those who care: national programmes for occupational health for health workers. World Health Organization/International Labour Organization policy brief; 2020 (<https://apps.who.int/iris/handle/10665/336479>).

Caring for those who care: guide for developing and implementing occupational health and safety programmes for health workers. World Health Organization/International Labour Organization; 2022 (<https://apps.who.int/iris/handle/10665/351436>).

Occupational hazards in the health sector. World Health Organization e-tool (<http://www.who.int/tools/occupational-hazards-in-health-sector>).

Protection of health and safety of health workers: checklist for health care facilities. World Health Organization; 2020 (<https://apps.who.int/iris/handle/10665/334371>).

HealthWISE - Work Improvement in Health Services. Action manual and trainers' guide. International Labour Organization/World Health Organization, 2014 ([https://www.ilo.org/sector/Resources/training-materials/WCMS\\_250540/lang--en/index.htm](https://www.ilo.org/sector/Resources/training-materials/WCMS_250540/lang--en/index.htm)).